APPLICATION FOR CERTIFICATE OF APPROPRIATENESS CITY OF MCCOMB HISTORIC PRESERVATION COMMISSION

I. Address of Property	
II. Owner's Name and Address	
III. Applicant's Name and Addres (If Not Owner)	S
IV. Applicant's Relationship to Ov	vner
V. Detailed Description of Project	[Please Use Additional Page(s) If Necessary]
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VI. Please Submit the Following M	laterials with the Application
	nitted with the application on the required date and time of

- (1) Plans (including Drawings and Specifications) of the Proposed Project
- (2) Photograph(s) of the Property with respect to the Proposed Project

Certificate of Appropriateness may either be delayed or denied.)

(3) Sample Materials to be Used and Their Relation to the Proposed Project (This is required <u>only</u> for projects involving windows, building additions, and/or new construction)

VII. Beg	ginning Date of Project	
VIII. En	iding Date of Project	
ana/or th	Latitude and discretion may be applied le E Zoning, Inspections, and Permits Depa he project due to delays in construction.)	rtment regarding the beginning and ending
I certify t	o the best of my knowledge that all infor	mation in this application and its attachments
SIGNAT	URE OF PROPERTY OWNER	DATE OF SUBMITTAL
	URE OF APPLICANT ȚHE OWNER)	DATE OF SUBMITTAL
FOR AI	OMINISTRATIVE USE ONLY:	
Application	on No	Date Received
		Date of Final Action
	Approved by Zoning, Inspections, and Permits Department	
	SIGNATURE	DATE
	Approved by Historic Preservation Commission	
	SIGNATURE	DATE
	Denied for the following reason(s):	

THIS APPLICATION MUST BE SUBMITTED TO THE ZONING, INSPECTIONS, AND PERMITS DEPARTMENT NO LATER THAN AT 5:00 P.M. ON THE THURSDAY PRIOR TO THE REGULARLY SCHEDULED MEETING OF THE HISTORIC PRESERVATION COMMISSION TO BE INCLUDED ON THE AGENDA OF THAT MONTH'S COMMISSION MEETING.